

NORTHERN ILLINOIS UNIVERSITY

Life from the Perception of the Adolescent

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By

Shatoya Black

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Abstract

I chose the title "From the eyes of the adolescent" to challenge individuals to look at the world the adolescents point of view. Adolescents face pressures; changes and the expectation of having to meet everyone demands which can be very overwhelming and can possibly cause them to lash out from frustration and not having anyone to talk to. Facing these types of demands and changes has been known to cause individuals to make irrational and unwise decisions.

Adolescents have to meet the demands of the school, home, peer, body changes and the feeling like no one understands or is interested in taking time to hear their issues or concerns. As helping professionals, family members, and community members, we try to find out what the problem is in order to find a solution and create programs that will have a lasting impact on the adolescent. Parents approach situations eager to know what's causing the adolescent to behave in a certain manner. We desire to help the adolescent but refuse to allow them to have a voice. If we take time and put our concerns to the side to actually hear and observe the things that adolescents face on an everyday basis, we will be able to affectively assist them in how to handle the demands of changes they are going thru. We would be able to show empathy towards the adolescents so they become open to the help or assistance that may be provided, as well as programs that will help them.

In conclusion, I believe the solution is to develop programs that will build the family structure. This will help to give the whole family including the adolescent what they need to effectively communicate amongst each other and grow in unity. As helping professionals we can teach skills to the whole family and still provide help to the adolescent with taking on full responsibility. This will help to change them individual and in their family environment at home. One program I came up with is "A Better Me, A

Better You” which means that as I become better individually, the family bond becomes better; their personal environments began to change and their perception. Another view of this program is as I help someone else to achieve better, I will become a better person in the process causing a unique impact.

Life from the perception of the adolescent

An adolescent is considered a person between the ages of 13 and 19. However, the start of puberty has had an increase in preadolescence and occasional extension beyond the teenage years compared to previous generations. These changes have made it more difficult to define the time frame in which adolescent occurs (Everyday Health, 2009).

Many adolescents find themselves affected by the environment around them such as body image, eating disorders, peer relationships, academic pressures, depression, home environment, and teen suicide. It is really important for adults to understand the many challenges that adolescents face because it will give them clarity on the reason for the many mood that the adolescent is experiencing do to the multiple changes that occur at once. If it's hard for the adults to deal with just image how the adolescent may feel not know what is going on themselves. There is a great need for services geared towards these issues because in many cases adolescents develop harmful ways of coping with issues they face because they are often not allowed to communicate openly what they are feeling. Coping mechanisms are developed by people trying to deal with reoccurring issues, which are directly impacting their environment.

Teenagers as well as pre-teen feel social pressure to conform to the group of people they socialize with often. This type of peer pressure can influence how children dress, kind of music teens listen to, and the types of behavior youth engage in such as drugs, alcohol and sex.

Cognitive development, identity form and achievement (Erikson & Piaget)

“Erikson, in many ways stayed true to the psychoanalytic assumptions grounded

in Sigmund Freud, but there were differences as well. He accepted Freudian notions such as the ego, the oedipal complex and the development of the self through various stages rather than rely entirely on universal drives from within the psyche to explain cognitive development and personality. Erikson integrated information from anthropology about the role played by society and culture. Children within each culture learn different values, different goals, and receive vastly different kinds of nurturing and guidance. These influences powerfully shape how the psyche of the child develops and how he/she will navigate the typical physical developments” (Schultz, 2003, 43).

In contrast to Freud’s five stages of development, he perceived that there were eight distinct phases of development. The stages were trust vs. mistrust, autonomy vs. shame & doubt, initiative vs. guilt, industry vs. inferiority, identity vs. confusion, intimacy vs. isolation, generativity vs. stagnation and integrity vs. despair (Cherry, 2011). To be successfully developed in life, the individual must find a balance between each of the values. This theory guides and assesses with teaching and child rearing practices in term of their ability to nurture and facilitate healthy emotional and cognitive development. Like Piaget, Erikson came to the conclusion that children should not be rushed through their development. Each developmental phase is important and should be allowed time to fully unfold. While Piaget emphasized that cognitive development could not be rushed (without sacrificing full intellectual potential), Erikson stated that a child’s development must not be rushed or dire emotional harm would be done, harm that would seriously undermine a child’s ability to succeed in life (as stated in Cherry, 2011).

In the final stage of Paget’s Cognitive development (12 & beyond), children begin to

develop a more abstract view of the world. They are able to apply reversibility and conversation to both real and imagined situations. They also develop an increased understanding of the world and the idea of cause and effect by adolescent years. They are able to develop their own theories about the world (as stated in Cherry, 2011).

Peer Relationships, Depression, and teen suicide

Peer Pressure

Peer groups are friends who are about the same age. Peer pressure can begin in early childhood with children trying to get other kids to play the games they want. It generally increases through childhood and reaches into the preteen and teen years. Most adolescents in middle and high school deal with peer pressure, on a daily basis (Johnson, 1985). Depending on the group of people trying to apply the influence, peer pressure can be negative or positive (Johnson, 1985).

“Adolescents spend more time with peer and less with family. However, most teenagers’ fundamental values remain closer to their parents than is generally realized. The most secure adolescents have strong, supportive relationships with parents who are attuned to the way the young people see themselves, permit and encourage their strivings for independence, and provide a safe haven in times of emotional stress” (Papalia, et al, 2009, 23).

Depression

According to the National Alliance on Mental Illness (2010), about 2% of young children have depression and one in five teens become depressed at some time in their lives. Childhood depression is a serious issue. Teens affected by depression are at risk for substance abuse, suicide, and recurring episodes of depression later in life (NAMI, 2010).

Depression is directly connected to the actual thought of suicide. The Developing Person Psychology (2008) book states that repeatedly thinking and talking about past experience; can contribute to depression which is called rumination. Talking about, remembering, and mentally replaying past experiences is more common among females than males (Berger, 2008).

I personally agree because I have experienced a whole lot of things in life. For the last two years, starting in 2009 life adversities weighed heavy on me. I was working a job at the bank and ended up going to the doctor for a checkup and was told that there were many cancerous cells. The doctor stated that if I went from moderate to severe that I would need surgery to remove the cells. I ended up needing the surgery, lost my job, which caused me to lose everything in 2009 becoming homeless. The tragedy did not stop there. I ended up in DeKalb where I did not want to be only because they offered me an apartment. I went through in my mind almost having a nervous breakdown and totally depressed. I began to do as the book stated, repeatedly thinking, talking, and sometimes crying about my experiences which in the pass contributed to depression as well as suicide thoughts. Many times I was afraid of asking for help, because I wanted to maintain the happiness I carried despite my situations and many would not be able to grasp the ability to stay calm in my situation. Adolescents do not have as much self-control to endure the pressures of the world or life. I believe that like me, they to cry out for help without judgment but end up thinking that we have things under control, wanting someone to hear our silent cry for help. Then there is that question who do I cry out to, who will actually help me or direct me to help with pure motives. Adolescents often want someone to believe in them and understand their pain.

Some parents ignore the signs of depression, thinking it is no worse than the normal adolescent behavior or rebellion associated with teen years. All teenagers go through periods of isolation, but for some teens, it goes a lot deeper. Teens who suffer from depression often act restless or agitated, unable to concentrate for even short periods of time; they experience changes in behavior, trouble finding energy or motivation to do simple things. Many times the stress and depression that comes from life leads teens in the direction of suicide and possible drug abuse (American Academy, 2000).

Suicide

Each year in the U.S., approximately 2 million adolescents attempt suicide, and almost 700,000 receive medical attention for their attempt (AACAP, 2001). According to the youth risk behavior surveillance system, in 2001, 2.6% of students reported making a suicide attempt that had to be treated by a doctor or nurse. With respect to suicide, it is estimated that each year in the U.S., approximately 2,000 youth ages 10-19 complete suicide. In 2000, suicide was the 3rd leading cause of death amongst young people 15 to 24 years of age (AACAP, 2001). Distressing thought that teenagers have about killing themselves starts around age 10. Often, in many cases teenagers attempt to commit suicide but do not succeed, which is called Para suicide. Para suicide is any potentially lethal action against the self that does not result in death (Berger, 2008). After a potential suicide, many adolescents feel relieved that they survived. International rates of teenage Para suicide are listed to be between 6 and 20 percent, a range reflecting cultural differences in frequency and in data collection (Berger, 2008). For example, among eleventh-graders in U.S. High Schools during the year 2005, eleven percent of the girls and 4.5 percent of the boys said they had tried to kill themselves (Berger, 2008). The rate

of completed suicide for age fifteen to nineteen in the United States that year was only four per 100,000 (Berger, 2008).

Suicide among young people continues to be a serious problem each year in the United States. Thousands of teenagers commit suicide. Teenagers experience strong feeling of depression, stress, confusion, self-doubt, pressure to succeed financial uncertainty and other fears while growing up. Dealing with stress, depression and suicide can often cause changes in the body.

Body Image and the media role in the issue

There are many adolescents who are not pleased with their bodies. "Many people blame today's media for perpetuating and glorifying unrealistic standards of physical beauty. Virtually every media form provides ample evidence of the sexualization of women, including television, music videos, music lyrics, movies, magazines, sports media, video games, and the internet advertising" (American Academy, 2000, 12). Studies indicated that women more often than men are portrayed in a sexual manner. The media shows women dressed in revealing clothing, with bodily postures or facial expression that implies sexual readiness. In addition, a narrow and unrealistic standard of physical beauty is heavily emphasized, these are the models of femininity for young girls to study and emulate (Johnson, 1985).

The media has a strong voice in our communities and the images that are portrayed makes young people believe that beauty is what is shown on the outside. The media images show that you should look a certain way by making everything about sex. The media expresses beauty as being sexual instead of real beauty, which starts from within. For example, when I was younger, I never heard that I was beautiful or that it was

okay to be different. I was fully developed at a young age and very uncomfortable around my peers. I had breasts at 9 and the biggest person in the classroom. I would watch television and there were certain things I desired to be such as skinner, longer hair, and what was considered to be sexy or attractive. I ended up becoming what some called a tom boy because I was accepted there for who I was. Many times young people do not appreciate their uniqueness because they are told what to be instead of being their selves. They are often compared to their peer, other siblings and their parents as adolescent, never being able to form their own identity and mistake their own mistakes as part of adolescent development. The media portray this image of what beauty is, and when people cannot live up to the standard they become depressed and suicidal.

Many people I talk to, whether I know them or they are random people, state that there is something about their bodies that they do not like. Often wishing to be like someone else, instead of who they were created to be individually. This can cause them to have false expectations for themselves to reach a goal to learn or be like someone else which is not obtainable.

According to *The Developing Person* psychology book (2008), obesity is considered an eating disorder. Other disorders are anorexia which a person restricts eating to the point of starvation.

“Most victims are high- achieving females in early adulthood. Then, there is bulimia an eating disorder in which the person, usually female, engages repeatedly in episodes of binge eating followed by purging through induced vomiting or use of laxatives. Dieting sometimes leads to anorexia nervosa, a disorder of self-starvation. Individuals voluntarily under eat and over exercise,

depriving their vital organ of nourishment. Between 5 and 20 victims die”

(Berger, 2008, Pg. 17).

Academic Pressures

Few people would disagree that parents play an important role in their children's achievement. On the other hand some people may argue that parents of high achieving students play a critical role in pressuring their children to achieve at unrealistically high levels or to satisfy the parent's needs (Cech, 2008). Many times parents tell their children if they get good they are free to do as they please because all that matter is maintaining the high level of achievement. Many times parents want to push their children to achieve better out of life. Often times parents push their children in the direction that they as parents actually wanted to go at their children's age. According to *Education Week* (2008), high school students are feeling more stress over grades. The latest edition of “The State of Our Nation's Youth,” which has published poll results episodically since 1996, found a marked increase in academic pressure reported among the nation's teenagers (Cech, 2008). The proportion of students reporting that pressure to get good grades creates a problem for them increased from 62 percent in 2001 to 79 percent in 2009. Twenty one percent of students said they spent more than 10 hours a week on homework (Cech, 2008).

Late versus early maturation

Changes that herald puberty now typically begin at age eight in girls and age nine in boys (Papalia et al, 2009). Recently, pediatricians have seen a significant number of girls with breast budding before their eighth birthdays (Papalia et al, 2009), which I can agree with because it is occurring just like that for my own daughter, who is seven and

about to be eight in four months. The pubertal process typically takes about three to four years for both sexes. African American and Mexican American girls generally enter puberty earlier than white girls. Some African American girls experience pubertal changes as early as age 6 (Harrington 2004).

The primary sex characteristics are the organs necessary for reproduction. In the female, the sex organs include the ovaries, fallopian tubes, uterus, clitoris, and vagina. In the males they include the testes, penis, scrotum, seminal vesicles, and prostate gland. During puberty these organs enlarge and mature. Secondary sex characteristics for girls are breasts, pubic hair, underarm hair, changes in voice, and changes in skin, increased width, and depth of pelvis. For boys it is pubic hair, underarm hair, muscular development, facial hair, changes in voice, changes in skin, and broadening of shoulders (Papalia, Olds, & Feldman 2009).

Early maturation is when you get your period and develop secondary sex characteristics (Johnson, 1985). It also occurs before age ten and after fourteen years old. Johnson (1985) states that early maturation for girls often lack self-confidence, are less popular, more likely to be depressed, behavior problems and more likely to drink and smoke. Girls that have late maturation are thought to be better adjusted. Children age 12-17 investigated the relationships between maturational timing, body image, school behavior, and deviance. In terms of body image, the early maturing boys were the group most satisfied with height and weight with 69% wishing to be thinner. This causes a problem with body image (Johnson, 1985).

For girls early maturation associated with more psychological problems such as poorer body image, more food intake restriction, higher rates of depression, anxiety

disorders but more popular with boys. Because of early maturation girls had higher rates of delinquency, substance abuse and early sexual interaction. Boys' on the other hand early maturation associated with better social and emotional functioning. Boys have more chances to socially interact with girls, more confident and more likely to be leaders. The down fall for the boys is that they are more at risk for antisocial behavior and substance abuse. At the time of puberty, late matures are more intellectually curious, less prone to intense negative emotions. I can personally understand how early vs. late maturation can have very different effect on boys and girls. Many times we have very negative feelings about developing quicker than others.

In conclusion, this paper talked about understanding the adolescent issues from their perception. I believe it is important to gain an understanding about situations before trying to come up with the problem and the solution As I researched I found out that adolescents go through so much pressure in their lives and we expect them to snap out it but that is something that is still a challenge for adults to do. I began to even understand a whole lot about myself personally. I believe that a change needs to occur be in unity and the media is where the change needs to start because of the huge impact it has on our society. The parents, family, community, and schools all play a big role in the development of the child. It is not enough to just have book smarts but there is a need for knowledge of the things that are not covered in the books such as identity, self-worth, self-esteem, accountability and self-control. If everyone is looking out for self, who will take time to be there for others. I am will to be that change that I want to see but can not do it alone. Individually we can make a difference but in unity we can make an unique impact in our communities and families.

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